

FORMS FOR BID

FOR CONSTRUCTION ON STATE HIGHWAY IN KINGS COUNTY IN AND NEAR KETTLEMAN CITY FROM ROUTE 5/41 SEPARATION TO FRESNO COUNTY LINE In District 06 On Route 5 Under

Notice to Bidders and Special Provisions dated March 21, 2016

Standard Specifications dated 2010

Project plans approved November 9, 2015

Standard Plans dated 2010

Applicable to

Electronic *Bid* book dated March 21, 2016 Identified by Contract No. 06-0T6104 06-Kin-5-16.6/26.7 Project ID 0615000217

> Federal-Aid Project ACNHPI-005-4(196)309E

DBE - COMMITMENT

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:						
BID AMOUNT:						
BID OPENING DATE:						
BIDDER'S NAME:						
DBE GOAL FROM CONTRA	ACT %:					
DBE PRIME CONTRACTOR	R CERTIFICATION ¹ :	TOTAL NUMBER OF A	LL SUBCONTRACTS (DBE &	NON-DBE)	TOTAL VALUE OF ALL SUBCONTRA	CTS (DBE & NON-DBE)
BID ITEM NO.		D DESCRIPTION OF JBCONTRACTED OR BE PROVIDED ²	WORK CATEGORY CODES ³	opened.	NAME OF DBEs st be certified on the date bids are Include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
Show all DBE firms being each DBE shown stating shown for the specific am	that it will be participatii				Total Claimed Participation	<u>S</u>
The names of the 1st tier Subcontractor List (Pub C			be consistent with the		ratterpation	%
¹ Each DBE prime contrac performed by DBEs, inclu	tor must enter its certifi	cation number and st	now all work to be		er acknowledges that it is comm own on this form to meet the cor	itted to use the
² If 100% of an item is not the item to be performed		nished by the DBE, de	escribe the exact portion of			
^a Use Work Category Cod	les from the California L	Inified Certification P	rogram database.	Sig	gnature of Bidder	
				Da	te (A	rea Code) Tel. No.
				Pe	rson to Contact (Ple	ease Type or Print)

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DBE CONFIRMATION

DES-OE-0102.13 (NEW 05/2015)

	<u> </u>		
Contract no.:			
Name of DBE business:			
Name of DBE representative	9:		
DBE certification number:			
Name of bidder:			
Name of prime contractor if	different from the bidder:		
Name of representative of bi	idder or prime contractor:		
Date:			
Bid item number	Item of work and description of services to be subcontra	cted or materials to be provided ¹	Amount (\$)
¹ If 100% of an item is not to portion of the item to be pe	be performed or furnished by the DBE, describe the exact rformed or furnished.	Total	
		enterprise, I confirm that my busin prime contractor shown above reg the bidder is awarded the contract contractual agreement with the bid the type and dollar amount of worl form.	dder or prime contractor to perform
		Signature of DBE's authorized	representative:
		Printed name of DBE's author	ized representative:
		Title of DBE's authorized repre	esentative:
		Date:	_

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STATE OF CAL	IEODNIA .	DEDADTMENT	OF TRANSPORTATION	

DBE GOOD FAITH EFFORTS DOCUMENTATION

DES-OE-0102.11A (REV 12/2014)

Bidder's Name	¢
Contract No.: _	

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List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

Item of Work Offered, Services Offered, or Materials Supplied	Perfori	Normally ms Item s/No	Facilitate I	en Down to Participation s/No	for Performan Scho	xible Timeframes ce and Delivery edules s/No	Amount (\$)	Percentage of Total Bid
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	NO		
	YES	□ NO	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	□ №	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		

DRE GOOD EAITH FEFORTS DOCUMENTATION				
	YOOD EA	TH EEEVD:	TO DOCIDA	

Bidder's Name:	
Contract No.:	

DES-OE-0102.11A (I		ill the dates on w	hich they were solicite	d to hid on this project l	nclude the items of work offered a	nd the dates and metho	Page 2 of 3
					n copies of solicitations. e-mail me		
Name of DB	BE Solicited	Date of I	nitial Solicitation	ltems o	f Wark Offered	Follow Up Me	thods and Dates
DBE, the DBEs that pro	vided quotes, the	price quote for e	each firm, and the price		specific to the items of work being E if the selected firm is not a DBE ract.		
Items of Work	Provide Specifications f	ed Plans/ for Work Offered s/No	Name of Selected Firm		Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	YES	□ио					
	YES	Ои					
	YES	Ои					
	YES	Пио					
	YES	Пио					
	YES	Пио					
	YES	Пио					
	YES	□ NO					
	YES						
			easons for the selection		nd attach names, addresses, and	phone numbers for the	firms listed above.

DRE GOOD FAITH FEFORTS DOCUMENTATION

Contract No.:

Bidder's Name:

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Describe the Bidder's outreach efforts to ide documents.	entify and solicit the interest of all certified DBE	s that have the capability to perform the work o	of the Contract, Provide copies of supporting	
Description of Outreach Dates Location (if applicable)				
	de interested DBEs with adequate information a assisted, the type of information provided, and			
 Describe the Bidder's efforts made to assist dates. Provide copies of supporting document 	interested DBEs in obtaining bonding, lines of s.	credit, or insurance. Identify the DBEs assiste	d, the type of assistance offered, and the	
equipment the DBE purchases or leases from documents. List efforts made to assist interest	t interested DBEs in obtaining necessary equip the prime contractor or its affiliate. Identify the red DBEs in obtaining bonding, lines of credit, in bocontractor purchases or leases from the primi	DBEs assisted, the type of assistance offered, surance, necessary equipment, supplies, mat	and the dates. Provide copies of supporting erials, or related assistance or services,	
List the names of agencies and the dates o provide copies of supporting documents.	n which they were contacted to provide assista	nce in contacting, recruiting, and using DBE fir	ms. If the agencies were contacted in writing,	
9. Include additional data to support a demons	stration of good faith efforts.			
NOTE: USE ADDITIONAL SHEETS OF PAPE	ER IF NECESSARY.			

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